

Commonwealth of Virginia  
Department of Professional and Occupational Regulation  
9960 Mayland Drive, Suite 400  
Richmond, VA 23233  
(804) 367-8506 or 367-8512  
[www.dpor.virginia.gov](http://www.dpor.virginia.gov)



Board for Architects, Professional Engineers, Land Surveyors,  
Certified Interior Designers and Landscape Architects

**INTERIOR DESIGNER CERTIFICATE RENEWAL FORM**  
**RENEWAL FEE DUE \$45**

➔ USE THIS FORM ONLY IF YOU DO NOT RECEIVE YOUR RENEWAL NOTICE FROM THE DEPARTMENT. THE RENEWAL NOTICE IS MAILED TO YOUR ADDRESS OF RECORD APPROXIMATELY 45 DAYS PRIOR TO THE EXPIRATION DATE ON YOUR CERTIFICATE. YOUR CERTIFICATE CANNOT BE RENEWED MORE THAN 90 DAYS PRIOR TO THE EXPIRATION DATE ON YOUR CERTIFICATE.

So that we may renew your certificate, complete **all** the following information. Please key the information directly onto the form or print clearly.

NAME: \_\_\_\_\_

SOCIAL SECURITY NUMBER OR VA DMV CONTROL NO.\*  -  -

LICENSE NUMBER: 0412

ADDRESS: \_\_\_\_\_

If your mailing  
address is a post  
office box, you  
MUST also  
provide your  
physical (street)  
address.

Is this a new address? No ☐ Yes\* ☐ \* If yes, your address of record will be changed to the address on this form.

CERTIFICATE EXPIRATION DATE: \_\_\_\_\_

➔ **IMPORTANT: A \$45.00 renewal fee is due.** If payment is not received within 30 days after the expiration date on your certificate, an additional \$25 late fee will be charged. If payment is not received within 6 months after the expiration date on your certificate, you must contact the Board office at (804) 367-8506 or 367-8512 to get the appropriate forms to reinstate your certificate.

I certify that I continue to comply with the Standards of Practice and Conduct as established by the APELSCIDLA Board.

\_\_\_\_\_  
Signature (required)

Mail this form with your renewal fee, made payable to the *Treasurer of Virginia* or use the credit card payment form available at <http://www.dpor.virginia.gov/dporweb/forms/fin/creditcard.pdf> to the following address:

Department of Professional and Occupational Regulation  
Post Office Box 29570  
Richmond, VA 23242-0570

\* State law requires every applicant for a license, certificate, registration or other authorization to engage in a business, trade, profession or occupation issued by the Commonwealth to provide a social security number or a control number issued by the Virginia Department of Motor Vehicles.

FOR OFFICE USE ONLY	DATE	FEE	TRANS CODE	ENTITY #	APPLICATION #	FILE# / LICENSE #	ISSUE DATE
			2020			0412	